

Massachusetts Board of Registration in Nursing

Board News...

JANUARY 2006

VOLUME 1, NUMBER 1

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The mission of the Board of Registration in Nursing is to lead in the protection of the health, safety and welfare of the citizens of the Commonwealth through the fair and consistent application of the statutes and regulations governing nursing practice and nursing education

Board Members

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Sheila Kaiser, RN/NA
Vice-Chair
Maura Flynn, RN
Parliamentarian
Laurie Hartigan, LPN
Donna Lampman, RN
Ann Montminy, RN
Salvador Porras,
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Paulette Remijian,
RN/NP
Janet Sweeny Rico,
RN/NP
Mary Jean Roy, RN
David Seaver, R.Ph, JD
Philip Waithe, RN

What's New...?

Welcome to the Board of Registration in Nursing's inaugural edition of its E-newsletter. Outreach to, and communication with licensed nurses and the public is a top strategic initiative for the Board. In August 2005, cyberspace was selected as the medium of choice for communication. A web-based newsletter will allow the Board to share its latest news as it happens. We are mindful that many nurses may not have access to the internet. The Board is relying on those who do to spread the word about the new E-newsletter.

Our web page has a new look, and it is more user-friendly. Spend sometime exploring and navigating through the web pages and if you find areas that you think we can improve please email the Board at www.mass.gov/dph/boards/rn with your suggestions.

Since 2006 is an even numbered year, this is a RN renewal year. Be sure that the Board has your current address on file, as license renewal forms may not be forwarded by the postal service.

The Board will initially publish this newsletter on a quarterly basis and over time increase publication with monthly updates. We are investigating the development of a list-serve to increase our ability to communicate with you, and you with us. Visit regularly, call with questions and remember to check back on APRIL 1st for the next issue.

Board Member Profiles

Board Officers

Diane Marie Hanley, RN, MS - Chair, Board of Registration in Nursing

Recently elected Board Chair, Diane has served as a board member since 2003. She is in her fifth year of service as the Director of Cancer Care Education, Practice & Quality at the Dana-Farber Cancer Institute, where she co-led the application process leading to Magnet designation by the ANCC this year. Previously, Diane served for over twenty years in a variety of leadership and management capacities at the Brigham and Women's Hospital. She received her BSN from Saint Anselm College and MSN from Salem State College.

Diane's passion for nursing excellence carries over in her duties as Chair of the Board. As a nurse educator, her philosophy of staff development and continuing education is based on the assumptions that services provided are

customer-focused, pro-active, and state-of-the-art. Diane actively develops and encourages programs leading to enhanced critical thinking, competence, compassion, and research-based care. Diane brings to the Board a desire to enhance the role of the professional nurse and to assure the quality of patient care in an effort to address current needs and future trends in nursing.

Sheila N. Kaiser, RN/NA, MS - Vice Chair, Board of Registration in Nursing

Sheila was appointed to the Board of Registration in Nursing Advanced Practice seat in December 2003. Her current term runs through January 2007. Sheila's Board appointment followed her initial appointment to the Board's Advance Practice Registered Nurse task force in 2003. Sheila also serves on the National Council of State Boards of Nursing (NCSBN) Advance Practice Advisory Panel. The panel is addressing issues common to all state boards of nursing. NCSBN has charged the panel to develop a vision paper on the status and future of the role of regulation in advanced practice. Sheila is Chief Nurse Anesthetist at Massachusetts General Hospital, a 75% clinical and 25% administrative position. Recently Sheila stated, "I encourage any other nurses to get involved with activities that may take them beyond their traditional borders. The career fulfillment you find may be a pleasant surprise"

Maura Flynn, LPN, RN - Parliamentarian, Board of Registration in Nursing

Serving as the Board's Parliamentarian, Maura was appointed to the Board in July 1998. Maura has agreed to serve beyond the completion of her term, until the governor appoints her successor. Maura holds 1 of the 4 LPN seats on the Board.

She currently works as a staff nurse in the Dermatologic Surgery Unit at Lahey Clinic in Burlington. "Being a board member has been more rewarding and fulfilling than I ever could have imagined. Serving on the board has brought me in contact with some of the brightest nursing minds in Massachusetts. Whether it is setting standards, overseeing nursing education, working with disciplinary matters, or keeping abreast of current trends, our staff does an amazing job of keeping us informed, organized, and prepared for each and every board meeting...I am grateful for having had the opportunity to serve".

From the Board Chair

Diane Marie Hanley, RN, MS - Chair, Board of Registration in Nursing

In August the Board updated its vision, mission and strategic goal statement after several planning sessions including a Board retreat day. The Board goals are:

Goal 1: Manage a sufficient supply of appropriately qualified staff and relevant technological resources designed to achieve the Board's vision and mission.

Goal 2: Facilitate consumer access to safe, culturally competent care that is

provided by qualified, licensed nurses through the Board's participation in the Multi-state Nurse Licensure Compact.

Goal 3: Implement a complaint resolution process that is fair, consistent, timely, and effective.

Goal 4: As individuals and collectively, actively participate in professional development opportunities that foster regulatory excellence.

Goal 5: Develop and implement effective outreach strategies that promote statutory and regulatory compliance as well as an understanding of the Board's vision and mission.

Goal 6: Promote innovation through periodic and systematic outcomes measurement

that incorporates internal and external perspectives and "best practices".

Goal 7: Assume fiscal oversight through collaboration with the Division of Health Professions Licensure Director and the Board's Executive Director.

The goals will be accomplished in a variety of ways. This newsletter is just one example. Other initiatives underway include revisions to the regulations at 244 Code Massachusetts Regulations (CMR) 4.00: Advance Practice, 244 CMR 6.00: Nursing Education, and 244 CMR 8.00: Licensure Requirement. In the near future, we will have a new online licensing database, which will streamline license renewal and will include an on-line renewal option. Improvements to the complaint resolution process are underway. For fiscal year 05, the Board closed 743 open complaints; this represented a 25% increase in the complaint resolution rate from FY 04. Everyone continues to strive for regulatory excellence and achieving success in accomplishing the many initiatives to improve and enhance all Board functions. Stay Tuned. The best is yet to come!

From the Board Executive Director

Rula Harb, MS, RN - Executive Director

Appointed in March 2005 as the Executive Director (ED) of the Board of Registration in Nursing, Rula manages administrative and professional staff responsible for Board operations, licensing and renewal activities for 126,000 nurses on a daily basis with an average number of 9000 renewals a month. Rula's other duties as the ED include implementing consistent processes for initial licensure by exam and reciprocity, verification of current licenses through NURSISYS[®], issuance of certificates of standing, advanced practice authorization, Substance Abuse Rehabilitation Program (SARP), clerical support, data entry and responding to customer inquiries.

Rula served as Acting Executive Director, Associate Executive Director, and Nursing Education Coordinator before being appointed as the ED. Among her many responsibilities upon being appointed was to recruit to fill openings in the

leadership team. She is pleased to announce the appointment of Bette Lindberg as Deputy Executive Director, and Carol Silveira to Associate Director for Policy & Research.

From the Nursing Education Coordinator

Judith Pelletier, RN, MSN - Nursing Education Coordinator

Judie began her position as the Board's new Nursing Education Coordinator on June 20, 2005. Judie has been in nursing education for over 14 years and brings many experiences in this new role. She has served as a faculty member and program administrator at MassBay Community College in the Practical Nursing Program and at Roxbury Community College in the Practical Nurse and Registered Nursing Programs. A graduate of the University of Lowell (BSN) and Salem State College (MSN).

New: Education Policy 05-01

At the October 10, 2005 meeting, the Board of Registration in Nursing adopted Education Policy 05-01. The purpose of the policy is to clarify the term "Institutional Accreditation" defined at 244 CMR 6.01 and its application in 244 CMR 6.04, Standards for Nursing Education Program Approval, to the qualifications required of nursing education program administrators and faculty appointed under 244 CMR 6.04 (2).

Reminder: Precepted Clinical Experiences

The Guidelines for Clinical Education Experiences (Guideline), based on the Board's regulations at 244 CMR 6.04, identify the important role of nursing faculty in planning and implementing clinical learning experiences, regardless of settings. Criteria for the selection of clinical precepted nursing experiences include, but are not limited to, availability of preceptors who are registered nurses currently licensed in Massachusetts, who are not members of the education program and who serve as facilitators of student learning in the practice setting. A preceptor is required to have a baccalaureate degree in nursing, master's degree in nursing preferred and expertise in the clinical area being precepted.

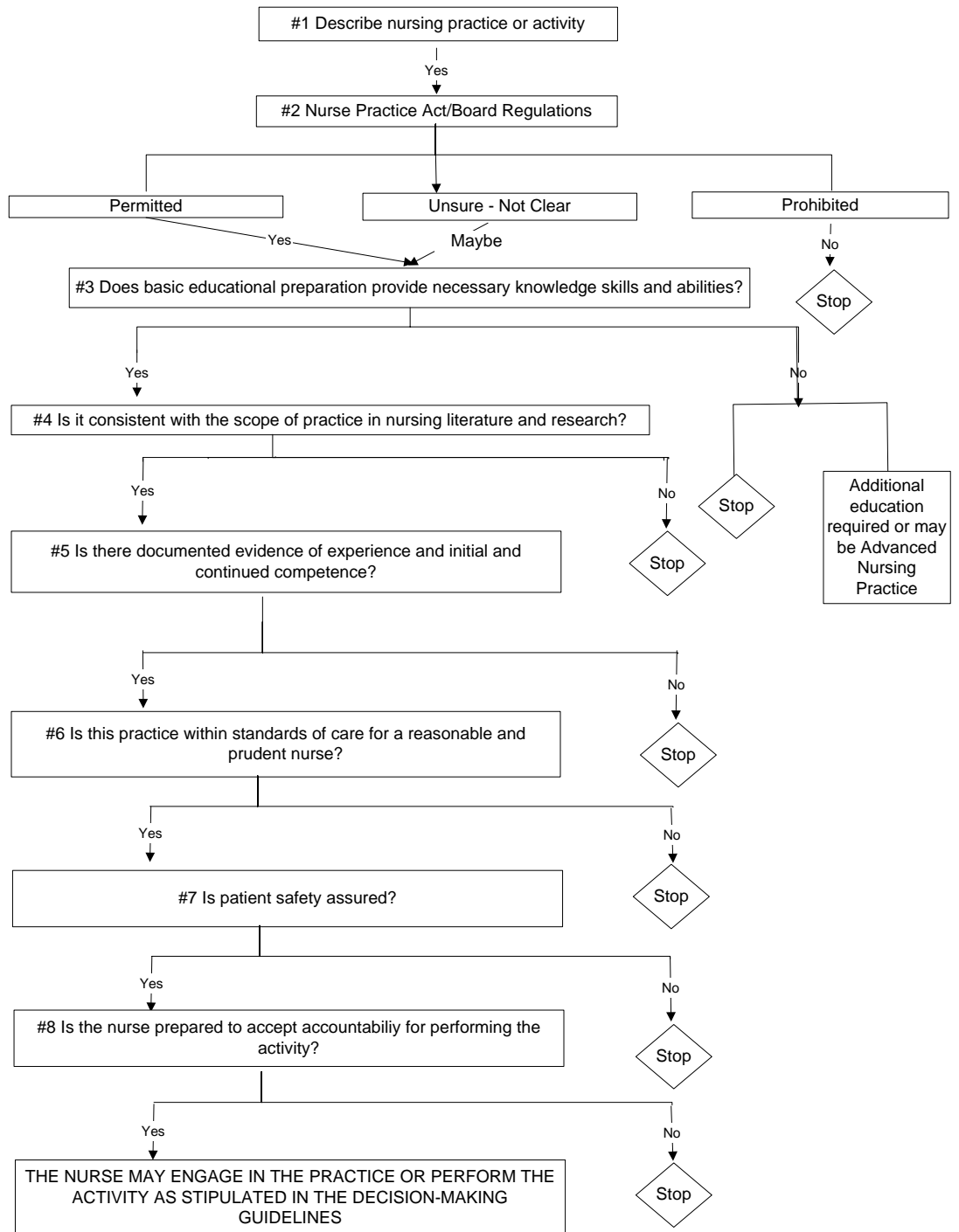
From the Nursing Practice Coordinator

Gino Chisari, RN, MSN - Nursing Practice Coordinator

As the nursing practice coordinator for the Board, Gino receives over 1500 inquiries a year primarily from nurses who have questions about their scope of practice. The questions typically center on a particular activity, skill or task.

Several years ago a decision-making tree for determining nurses' legal scope of nursing practice was developed to assist nurses in making their own determination of practice scope. A copy of the tree follows for your use.

Framework for Decision-Making Nursing Practice Activities



From the SARP Coordinator

Connie Borden, RN and Douglas McLellan, RN, M.Ed

In 1989 Massachusetts General Laws Chapter 112, section 80F was enacted establishing the Substance Abuse Rehabilitation Program (SARP).

SARP is designed to assist nurses whose competency has been impaired by substance abuse to return to practice. This voluntary alternative to discipline, is a confidential program that provides structure and support for nurses who admit to having a substance abuse problem and who are committed to recovery.

All nurses who wish to participate in SARP enter into a 5-year treatment contract with the Board. To protect public safety, SARP monitors participants through reports from therapists, professional support groups, physicians and employers. SARP licensees also participate in a toxicology-screening program and attend 12-step meetings and attend quarterly monitoring meetings with the SARP coordinators and Substance Abuse Rehabilitation Evaluation Committee (SAREC) members.

There are currently 194 nurses enrolled in the program. The staff now includes an Admission Coordinator, Tim McCarthy, and 2 SARP Coordinators, Connie Borden and Doug McLellan. In addition, there is a dedicated team of volunteer substance abuse specialists appointed to SAREC committee.

A statement from a recent SARP graduate summarizes her 5 years as a participant. "The SARP program has truly saved my life. SARP took away my choices but gave me the structured program that I needed. I now have the tools to deal with life in a healthy way."

From the Licensure Coordinator

Michael Bearse - Administrative Assistant Supervisor

Each applicant for initial nurse licensure by examination or reciprocity (initial applicant) in Massachusetts must comply with the "good moral character" (GMC) licensure requirement specified at Massachusetts General Laws (GL). c. 112, ss. 74, 74A and 76. GMC is one of four prerequisites to initial nurse licensure. Under the Board's Licensure Policy 00-01: Initial Nurse Licensure by Examination or by Reciprocity: Determination of Good Moral Character, the Board will determine whether an initial applicant possesses the GMC essential for safe, competent nursing practice by evaluating the initial applicant's demonstrated honesty, trustworthiness, integrity, accountability reliability, ability to distinguish between right and wrong and to observe the difference between the two, avoidance of aggression to self and others, and avoidance of injustice and deceit, among other relevant attributes.

When applying for initial licensure, applicants must report the conduct underlying certain criminal convictions and disciplinary actions taken by a licensure/certification body in another jurisdiction. For the purpose of Licensure Policy 00-01, "conviction" means the final judgement on a verdict or finding of guilty, a plea of guilty, a plea of nolo contendere (no contest), of a plea treated

by the court as a guilty plea, regardless of the jurisdiction in which the conviction was entered.

Each initial applicant who discloses a conviction or discipline by another licensing board is required to demonstrate compliance with the GMC licensure requirement.

According to this policy, an initial applicant convicted of certain specified crimes will be *permanently* excluded from Massachusetts nurse licensure (e.g. murder, rape, and indecent assault). This policy also provides that an initial applicant convicted of any crime will be *temporarily* excluded from licensure until he or she has been conviction-free for a minimum of five (5) years and has had all court-ordered requirements closed for a minimum of one (1) year before the date the Board receives the application for initial licensure, *unless* the applicant meets the criteria for the exception to this temporary licensure exclusion.

The Board evaluates an initial applicant's compliance with the GMC licensure requirement on a case-by-case basis to determine whether the applicant's conduct:

- Poses a threat to the public health, safety and welfare;
- Is of significance to the provision of safe, competent nursing care; and
- Is characteristic of the applicant's conduct.

In evaluating an applicant's GMC, the Board considers all available pertinent information as to the applicant's present and past conduct related to the criminal conviction or disciplinary action. By signing the application for a Massachusetts nurse license by examination or reciprocity, the initial applicant certifies under the pains and penalties of perjury that he or she understands that the Board is certified by the Massachusetts Criminal History Systems Board for access to all criminal case data and that the Board may conduct a criminal record check.

For additional information including the Good Moral Character Information Sheet visit the Board's website at www.mass.gov/dph/boards/rn.

From NCSBN

The National Council of State Boards of Nursing, Inc. (NCSBN) is a not-for-profit organization whose membership comprises the boards of nursing in the 50 states, the District of Columbia, and five United States territories--American Samoa, Guam, Northern Mariana Islands, Puerto Rico, and the Virgin Islands.

The purpose of NCSBN is to provide an organization through which boards of nursing act and counsel together on matters of common interest and concern affecting the public health, safety and welfare, including the development of licensing examinations in nursing.

NCSBN's programs and services include the NCLEX-RN® and NCLEX-PN® examinations, performing policy analysis and promoting uniformity in relationship to the regulation of nursing practice, disseminating data related to the licensure of nurses, conducting research pertinent to NCSBN's purpose.

Please feel free to visit the National Council of State Boards at www.ncsbn.org

Question of the Month

Q. *This is my first license renewal since getting my RN; can you explain the process to me?*

A. About two months before your birthday you will receive a renewal form in the mail. That is why it is both vital and the LAW that the Board has your current address in its file. The renewal form has three questions on it and when you put your signature on the portion you return to the Board, you are signing it under the pains and penalties of perjury that your responses are true. One of those questions is regarding your continuing education.

If this is your FIRST renewal since earning your license you do not need to earn continuing education for this renewal. You will need to earn continuing education once your first renewal has occurred, and in preparation for renewing your license on the next cycle which will be your birthday 2008 if you are a RN and 2007 if you are a LPN.

Continuing education is required of all nurses who are renewing their license. You must earn 15 CONTACT HOURS of continuing education (CE) per renewal cycle. A contact hour is 50 minutes of education that is specifically designed to attain, maintain, or otherwise improve your competency to perform nursing services. It does not include inservices, orientation or training sessions that are needed in order for you to perform your job functions.

Continuing education (CE) does not need to be pre-approved by the Board. Any educational event you take for CE credit towards relicensure must follow a format that meets the Board's regulations at 244 CMR 5.00: Continuing Education (please visit the Boards website for a complete listing and total access to the regulations).

Do not enclose your CE certificates with your license renewal application. Retain your certificates for four years and if you are randomly selected for audit you will be directed about where to mail them.

Read the license renewal form, sign the application, enclose a check for the correct amount and above all, be sure to mail it back in plenty of time. If your license expires before your license renewal application is received and processed by the Board, you MAY NOT WORK AS A NURSE in Massachusetts until it is renewed! If you have additional questions please see **FAQ** section in the Nursing Practice page of the website or call the Board office at (617) 973-0800. To track your license renewal application process, check your license status on the Board's website.

Important Information

As a reminder to all nurses, and other interested parties, Board meetings are open to the public, with the exception of the adjudicatory session, when matters regarding the Board's formal disciplinary proceedings are discussed. You are free to come and observe any or all of a Board meeting, and will simply

be asked to sign in as a guest. The meetings are held in Room 206 at the Board's office located at 239 CAUSEWAY STREET, BOSTON.

The meetings begin at 9:00 AM and generally last until 4:00 PM. The agenda for each meeting is posted on the Board's website several days before the meeting and you are welcome to review it and take it to the meeting with you.

The Board Meeting Schedule (subject to change) is:

January 11, February 8, March 8, April 12, May 10 & June 14, 2006...see you there!